

New Jersey Public Employment Relations Commission  
**NON-POLICE AND FIRE**  
**COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line #

**SECTION I: Parties and Term of Contracts**

1	Public Employer:	Township of Lower	County:	Cape May County
2	Employee Organization:	Lower Township Recreation Aides	Number of Employees in Unit:	10
3	Base Year Contract Term:	1/1/2012 - 12/31/2016	New Contract Term:	1/1/2017 - 12/31/2020

**SECTION II: Type of Contract Settlement (please check only one)**

- 4       Contract settled without neutral assistance  
 5       Contract settled with assistance of mediator  
 6       Contract settled with assistance of fact-finder  
 7       Contract settled with assistance of super-conciliator  
 8      If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?  
 Yes     No

**SECTION III: Salary Base**

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9	Salary Costs in Base Year	\$ 85,309.21
10	Longevity Costs in Base Year	\$ -
11	Total Salary Base	\$ 85,309.21

**SECTION IV: Salary Increases for Each year of New Agreement\***

	Effective Date (month/day/year)	Year 1	Year 2	Year 3	Year 4
		1/1/2017	1/1/2018	1/1/2019	1/1/2020
12	Cost of Salary Increments (\$)	\$ 6,780.00	\$ 2,034.00	\$ 2,034.00	\$ 2,034.00
13	Salary Increase Above Increments (\$)	\$ -	\$ -	\$ -	\$ -
14	Longevity Increase (\$)	\$ -	\$ -	\$ -	\$ -
15	Total \$ Increase (sum of lines 13- 15)	\$ 6,780.00	\$ 2,034.00	\$ 2,034.00	\$ 2,034.00
16	New Salary Base (\$)	\$ 92,089.21	\$ 94,123.21	\$ 96,157.21	\$ 98,191.21
17	Percentage increase over prior year	7.95%	2.21%	2.16%	2.12%

\*If contract duration is longer than five years, please add an additional page.

**SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items\***

	Item Description	Base Year Cost	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)
19	N/A					
20	Totals (\$):	\$ -	\$ -	\$ -	\$ -	\$ -

\*If contract duration is longer than five years, please add an additional page.

**SECTION VI: Medical Costs - N/A**

	Base Year	Year 1
21 Health Plan Cost		
22 Prescription Plan Cost		
23 Dental Plan Cost		
24 Vision Plan Cost		
25 Total Cost of Insurance		
26 Employee Insurance Contributions		
27 Employee Contributions as % of Total Insurance Cost		

Employer: Township of Lower

Employee Organization: Lower Township Recreation Aides

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**SECTION VI: Medical Costs (continued)**

- 28 Identify any insurance changes that were included in this C.N.A.

N/A

**SECTION VII: Certification and Signature**

- 29 The undersigned certifies that the foregoing figures are true:

Print Name: Lauren Read

Position / Title: CFO, Township of Lower

Signature:

Date: 12/21/2018

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Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: [contracts@perc.state.nj.us](mailto:contracts@perc.state.nj.us)

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NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016

## Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective negotiations agreement for the term beginning 1/1/2017 through 12/31/2020

Employer: Township of Lower  
County: Cape May County  
Date: 12/21/2018  
Name: Lauren Read  
Print Name  
Title: CFO, Township of Lower

Signature:

A handwritten signature in black ink, appearing to read "Lauren Read".